CA2 ALHM 5
A56
1969/1970
c.2

ALBERTA LEGISLATURE LIBRARY
3 3398 00440 9263

ANNUAL REPORT

FOR YEAR ENDED, JUNE 30TH

1970

ALBERTA PROVINCIAL LIBRARY
c2
JUN 10 1971
EDMONTON

ALBERTA HEALTH CARE INSURANCE COMMISSION

Digitized by the Internet Archive
in 2022 with funding from
Legislative Assembly of Alberta - Alberta Legislature Library

February, 1971

To HIS HONOUR, J.W. GRANT MacEWAN,
Lieutenant Governor of the Province of Alberta.

SIR:

I have the honour to present the Annual Report of The Alberta Health Care Insurance Commission for the year ended June 30, 1970.

Your obedient Servant,
J.D. HENDERSON,
Minister of Health

February, 1971

To THE HONOURABLE J.D. HENDERSON,
Minister of Health,
Legislative Building, Edmonton, Alberta.

SIR:

I am pleased to present the Annual Report of The Alberta Health Care Insurance Commission for the year ended June 30, 1970.

Respectfully submitted,
J.F. FALCONER
Chairman.

INTRODUCTION

Basic Health Services were provided to the residents of Alberta during the Plan Year July 1st, 1969 to June 30th, 1970 in accordance with the terms of The Alberta Health Care Insurance Act and The Health Insurance Premiums Act and the federal Medical Care Act. The Alberta Legislation reflects the four basic requirements of the Medical Care Act.

1. Coverage of at least 90% of residents of Province.

2. Operation of the Plan by a Provincial Authority.

3. Provision of Insured Services upon Uniform Terms and Conditions to all Residents.

4. Portability of Insured Services between Provinces operating under the Medical Care Act.

With the increase of the College of Physicians and Surgeons' suggested Schedule of Fees effective July 1st, 1969, the Commission's Schedule of Benefits was at the level of 93.5% of the College's Schedule. Physicians were not required to "opt in" or "opt out" of the Plan and had the privilege of charging patients an additional amount for their services, providing they made an arrangement or agreement with the patient before the service was provided.

In addition to the insured services demanded under the federal Medical Care Act, the Plan provides the following for limited coverage of services: Optometry, Chiropractic, Podiatry and Osteopathy.

RESPONSIBILITIES OF THE COMMISSION

The Commission is the Public Authority responsible under the Acts and regulations for the administration and operation of the Plan. The Commission makes by-laws prescribing the rates of benefits to be paid for practitioners' services and may enter into arrangements or make agreements for the payment to practitioners on other than a fee-for-service basis.

DESCRIPTION OF THE PLAN

Benefits

The benefits provided under the Plan known as Basic Health Services were as follows:

1. All medical services provided by General Practitioners and Specialists which were medically necessary.
2. Oral Surgery by dental surgeons for injury to or disease of the jaw restricted to certain specified procedures in accordance with the regulations.
3. Optometric services limited to the refraction of the eyes for the fitting of eye glasses once in every two benefit periods for adults and once in each benefit period for children under 18 years of age. The Plan provided payment of $10.00 for each refraction but did not pay for the fitting or cost of glasses.
4. Podiatric services and appliances in accordance with an agreed schedule of fees.
5. Osteopathic services at $4.00 for each visit.
   The benefits payable for services provided by a podiatrist or osteopath combined limited to a total of $100.00 per benefit period for any resident and his dependants.
6. Chiropractic services at $5.00 for each visit and an amount not exceeding $10.00 for X-rays for a particular disability.
   Chiropractic benefits limited to a total of $100.00 per benefit period for any resident and his dependants.

Premiums

Single residents were required to pay a premium of $60.00 per benefit period. Residents with one or more dependants were required to pay a premium of $120.00 per benefit period.

Subsidies

A resident registered under the Plan could apply for a premium subsidy equal to one-half of the premium payable by him if his taxable income (or the combined taxable income of himself and his spouse) for the preceding year was not more than $500.00.

GENERAL COMMENTS ON OPERATIONS

During the first year of operation, the Commission processed over 1,800,000 documents relating to registration including over 630,000 registrations, 425,000 letters and 600,000 change forms, adjustment documents and subsidy applications.

Also, the information services dealt with over 200,000 enquiries by telephone and personal contact.

A total of approximately 9,100,000 services representing 6,595,300 claims from practitioners in all disciplines were processed. A total of $73,568,853 was paid to all practitioners during the year. This includes $522,367 for claims outside of the province, and $1,478,074 which was paid for medical services carried out by doctors retained on salary by various federal and provincial departments.

The latest feature in microfilm, "Computer Onto Microfilm", has been used by the Commission since the start of the Plan. An average of 30,000 frames of microfilm per month were produced from Commission magnetic tape files using the facilities of Service Bureaux. This method not only is efficient in terms of speed of data conversion, 13,000 to 25,000 lines per minute, but also results in condensed files.

FINANCING OF THE PLAN

The Plan is financed by means of premiums from residents, federal cost sharing and subsidies from the Provincial Government.

The Provincial Government contribution from General Revenue for premium subsidy for the year totalled $4,062,772.50. In addition, premium payments are made from General Revenue on behalf of persons receiving some form of assistance from the province. This premium revenue totalled $4,076,098.50, making a total contribution by the province of $8,138,871.00.

The amount payable under the sharing formula for the year ended June 30, 1970 is estimated at $32,039,982.00, of this amount $30,704,400.00 was received prior to June 30, 1970 as monthly advances. The balance of $1,335,582.00 represents a hold back payable by the Federal Government on receipt of final audited cost sharing reports.

The Federal Government does not share in the cost of optometric, podiatric, osteopathic and chiropractic services. Administrative costs are also not shared.

Digitized by the Internet Archive
in 2022 with funding from
Legislative Assembly of Alberta - Alberta Legislature Library

https://archive.org/details/ableg_33398004409263

FINANCIAL STATEMENTS AND AUDITOR'S REPORT

AUDITOR'S REPORT

EDMONTON, February 11, 1971

The Alberta Health Care Insurance Commission
EDMONTON, Alberta

I have examined the Balance Sheet of The Alberta Health Care Insurance Commission, (Note 1), as at June 30, 1970, and the Statements of Revenue and Expenditure and Administrative and General Expenses for the year then ended. My examination included a general review of the accounting procedures and such tests of accounting records and other supporting evidence as I considered necessary in the circumstances.

Total premium revenue and premiums receivable are subject to adjustment upon determination of complete valid data in respect of first year's registrations. Allowance for this adjustment has been included with the provision for uncollectible accounts which is charged against the premium revenue for the year.

In my opinion, subject to the above, these financial statements present fairly the financial position of The Alberta Health Care Insurance Commission as at June 30, 1970, and the results of its operations for the year then ended, in accordance with generally accepted accounting principles.

(Signed) C.K. HUCKVALE, F.C.A.
Provincial Auditor

GOVERNMENT OF THE PROVINCE OF ALBERTA

THE ALBERTA HEALTH CARE INSURANCE COMMISSION

BALANCE SHEET AS AT JUNE 30, 1970

ASSETS

Current assets:		
Cash on hand		$ 573,567.24
Short term deposits, including accrued interest		7,537,559.91
Accounts receivable:		
Premiums, less provision for uncollectible accounts (Note 2)	$5,869,396.73	
Recoverable diagnostic services payments (Note 3)	4,402,449.28	
Government of Canada contributions	1,335,582.00	
Province of Alberta premium subsidy	1,174,427.50	
Miscellaneous	22,517.45	
		12,804,372.96
Prepaid expenses		165,923.31
		$21,081,423.42
Fixed assets, at cost: (Note 4)		
Office furnishings and equipment	$ 201,578.73	
Automobile equipment	7,829.67	
	$ 209,408.40	
Less: Accumulated depreciation	39,508.15	
		169,900.25
		$21,251,323.67

The accompanying notes are part of these financial statements.

LIABILITIES

Current liabilities		
Bank and treasury branch overdraft		$ 951,697.78
Accounts payable:		
Province of Alberta	$1,935,082.87	
Other	114,567.12	
		2,049,649.99
Premiums received in advance		1,643,881.38
Estimated liability for unprocessed and unpresented claims		13,411,852.08
		$18,057,081.23
Capital surplus arising from equipment transferred from the Alberta Health Plan		78,984.22
Revenue surplus:		
Excess of revenue over expenditure for the year ended June 30, 1970, Statement B		3,115,258.22
		$21,251,323.67

This is the Balance Sheet referred to in my report of February 11, 1971, addressed to The Alberta Health Care Insurance Commission.

(Signed) C.K. HUCKVALE, F.C.A.
Provincial Auditor

GOVERNMENT OF THE PROVINCE OF ALBERTA

THE ALBERTA HEALTH CARE INSURANCE COMMISSION

STATEMENT OF REVENUE AND EXPENDITURE

FOR THE YEAR ENDED JUNE 30, 1970

Revenue:		
Premiums earned, net (Note 2)		$50,062,692.25
Government of Canada contributions		32,039,982.00
Province of Alberta premium subsidy		4,062,772.50
Interest		515,222.57
		$86,680,669.32
Expenditure:		
Health services:		
Medical	$81,577,880.58	
Chiropractic	3,509,862.77	
Optometric	1,460,697.04	
Podiatric	289,560.39	
Oral surgery	118,684.85	
Osteopathic	24,018.66	
	$86,980,704.29	
Deduct: Recoverable diagnostic services payments (Note 3)	7,868,430.41	
	$79,112,273.88	
Administrative and general expenses, Statement C	4,453,137.22	
		83,565,411.10
Excess of revenue over expenditure for the year ended June 30, 1970		$ 3,115,258.22

GOVERNMENT OF THE PROVINCE OF ALBERTA

THE ALBERTA HEALTH CARE INSURANCE COMMISSION

STATEMENT OF ADMINISTRATIVE AND GENERAL EXPENSES

FOR THE YEAR ENDED JUNE 30, 1970

Salaries	$ 2,105,387.68
Data processing	967,273.81
Printing, stationery and office supplies	494,305.10
Postage, freight and express	281,887.58
Office rent and maintenance	146,687.45
Equipment rental	144,402.03
Advertising	94,361.25
Fees and commissions	55,235.07
Employee benefits	44,532.03
Audit fees	33,993.39
Telephone and telegraph	27,632.97
Depreciation	20,894.21
Travelling expenses	15,454.74
Light, water and fuel	12,710.24
Furnishings and equipment, repairs and replacements	7,848.81
Miscellaneous	530.86
	$ 4,453,137.22

GOVERNMENT OF THE PROVINCE OF ALBERTA

THE ALBERTA HEALTH CARE INSURANCE COMMISSION

NOTES TO THE FINANCIAL STATEMENTS

JUNE 30, 1970

Note 1 The Alberta Health Care Insurance Commission was incorporated under provisions of The Alberta Health Care Insurance Act to administer as an agent of the Crown in the right of Alberta, The Alberta Health Care Insurance Plan established by the Act, the regulations thereto and the by-laws of the Commission. The commencement date of the Plan was July 1, 1969, with the first fiscal year terminating on June 30, 1970.

Note 2 These are subject to the qualification contained in my certificate of February 11, 1971.

Note 3 Recoverable diagnostic services payments represent claims paid to approved x-ray and laboratory facilities on behalf of the Alberta Hospitalization Benefits Plan.

Note 4 Includes office and automotive equipment of a book value of $78,984.22 transferred from the Alberta Health Plan.

STATISTICAL

TABLES

Table 1.

REGISTRATIONS AND LIVES AT JUNE 30, 1970

	ONE PERSON		TWO PERSONS		THREE OR MORE PERSONS		TOTAL	
	REGISTRATIONS	LIVES	REGISTRATIONS	LIVES	REGISTRATIONS	LIVES	REGISTRATIONS	LIVES
NON SUBSIDIZED								
INDIVIDUAL	87,139	87,139	39,221	78,442	83,614	378,821	209,974	544,402
GROUP	70,977	70,977	51,317	102,634	135,506	606,901	257,800	780,512
TOTAL	158,116	158,116	90,538	181,076	219,120	985,722	467,774	1,324,914
SUBSIDIZED								
INDIVIDUAL	38,157	38,157	19,808	39,616	26,529	131,079	84,494	208,852
GROUP	1,779	1,779	997	1,994	1,634	8,507	4,410	12,280
TOTAL	39,936	39,936	20,805	41,610	28,163	139,586	88,904	221,132
DEPARTMENT OF SOCIAL DEVELOPMENT ASSISTANCE RECIPIENTS	33,205	33,205	6,070	12,140	9,965	46,286	49,240	91,631
TOTAL								
INDIVIDUAL	125,296	125,296	59,029	118,058	110,143	509,900	294,468	753,254
GROUP	72,756	72,756	52,314	104,628	137,140	615,408	262,210	792,792
SOCIAL ASSISTANCE RECIPIENTS	33,205	33,205	6,070	12,140	9,965	46,286	49,240	91,631
TOTAL	231,257	231,257	117,413	234,826	257,248	1,171,594	605,918	1,637,677

NOTE: 1. The total insured persons exceeds the provincial population by approximately 3%. This is accounted for by registrants temporarily outside the province for educational purposes, by registrants who have left the province but retain coverage for a period of three months and by registrants who have become eligible for their own coverage but have failed to advise the Plan of previous coverage on their parents registration.

2. These coverage figures do not include members of the Armed Forces, R.C.M.P. and inmates of Federal Penitentiaries.

Table 2.

COVERAGE BY FAMILY SIZE AS AT JUNE 30, 1970

SIZE OF FAMILY	REGISTRANTS	PERSONS COVERED
1	231,257	231,257
2	117,413	234,826
3	70,405	211,215
4	78,485	313,940
5	52,934	264,670
6	29,654	177,924
7	13,556	94,892
8	6,342	50,736
9	2,987	26,883
10	1,499	14,990
11	736	8,096
12	367	4,404
13	177	2,301
14	74	1,036
15 & over	32	507
TOTALS	605,918	1,637,677

NOTE: 1. The total insured persons exceeds the provincial population by approximately 3%. This is accounted for by registrants temporarily outside the province for educational purposes, by registrants who have left the province but retain coverage for a period of three months and by registrants who have become eligible for their own coverage but have failed to advise the Plan of previous coverage on their parents registration.

2. These coverage figures do not include members of the Armed Forces, R.C.M.P. and inmates of Federal Penitentiaries.

Table 3.

AMOUNTS PAID BY DISCIPLINE DURING THE PERIOD

JULY 1969 TO JUNE 1970

	TOTALS	PRACTITIONER	REGISTRANT
Medical *	$68,757,826	$67,442,195	$1,315,631
Dental	84,615	71,643	12,972
Chiropractic	3,090,936	2,950,128	140,808
Optometry	1,354,704	1,304,447	50,257
Osteopathy	21,495	20,999	496
Podiatry	259,277	257,996	1,281
TOTAL	$73,568,853	$72,047,408	$1,521,445

* Amount paid to medical practitioners includes $1,478,074 paid on behalf of salaried doctors employed by Provincial and Federal Departments.

Table 4.

AMOUNTS CLAIMED AND PAID BY DISCIPLINE

JULY 1969 TO JUNE 1970

	AMOUNT CLAIMED	AMOUNT PAID	REDUCED BY ASSESSMENT
Medical	$70,146,428	$68,757,826	$1,388,602
Dental	86,992	84,615	2,377
Chiropractic	3,097,963	3,090,936	7,027
Optometry	1,387,380	1,354,704	32,676
Osteopathy	22,770	21,495	1,275
Podiatry	260,391	259,277	1,114
TOTAL	$75,001,924	$73,568,853	$1,433,071

Table 5.

EXPENDITURE BY DISCIPLINE

JULY 1969 TO JUNE 1970

	TOTAL	ALLOWANCE FOR UNPRESENTED AND UNPROCESSED CLAIMS	AMOUNT PAID TO JUNE 30, 1970
Medical	$81,577,881	$12,820,055	$68,757,826
Dental	118,684	34,069	84,615
Chiropractic	3,509,863	418,927	3,090,936
Optometry	1,460,697	105,993	1,354,704
Osteopathy	24,019	2,524	21,495
Podiatry	289,561	30,284	259,277
TOTAL	$86,980,705	$13,411,852	$73,568,853

Table 6.

CLAIMS RECEIVED BY METHOD OF BILLING

JULY 1969 - JUNE 1970

Claims Received from	Number of Claims Received	% of Claims Received
Registrants	129,200	1.96
Practitioners		
Claim Cards	5,042,300	76.44
Punched Cards	462,300	7.01
Magnetic Tape	962,500	14.59
Total Practitioners	6,467,100	98.04
TOTAL CLAIMS	6,596,300	100.00

NOTE:- Average claims per day 26,700

Table 7.

AVERAGE PAYMENTS BY DISCIPLINE TO PRACTITIONERS RECEIVING OVER $10,000

JULY 1, 1969 TO JUNE 30, 1970

DISCIPLINE	NUMBER OF ACTIVE PRACTITIONERS RECEIVING OVER $10,000	TOTAL PAID	AVERAGE PAYMENT
Medical	1418	$65,837,056	$46,430
Dental	3	37,115	12,372
Chiropractic	124	2,942,062	23,726
Optometry	64	993,052	15,516
Osteopathy	1	12,925	12,925
Podiatry	7	258,368	36,910
TOTAL	1617	$70,080,578	

NOTE: 1. Average payments includes only those practitioners who received $10,000 or more. A total of 2113 practitioners received payments during the Benefit Period.

2. The information shown for Dental refers only to the limited procedures covered by the Plan.

Table 8.

DISTRIBUTION OF PAYMENTS BY DISCIPLINE

JULY 1, 1969 TO JUNE 30, 1970

$ RANGE	TOTAL	MEDICAL	DENTAL	CHIROPRACTIC	OPTOMETRY	OSTEOPATHY	PODIATRY
10,000 - 19,999	278	164	3	56	53	1	1
20,000 - 39,999	610	538		58	11		3
40,000 - 59,999	498	488		8			2
60,000 - 79,999	132	130		1			1
80,000 - 99,999	50	50					
100,000 - 119,999	18	17		1			
120,000 - 139,999	8	8					
140,000 - 159,999	7	7					
160,000 - 179,999	3	3					
180,000 - 199,999	3	3					
200,000 - 219,999	1	1					
220,000 - 239,999	5	5					
240,000 & Over	4	4					
TOTAL	1617	1418	3	124	64	1	7

Table 9.

AVERAGE MEDICAL PAYMENTS BY SPECIALTY TO PRACTITIONERS RECEIVING OVER $10,000

JULY 1, 1969 TO JUNE 30, 1970

SPECIALTY	NUMBER OF ACTIVE PRACTITIONERS RECEIVING OVER $10,000	TOTAL PAID	AVERAGE PAYMENT
TOTAL	1418	$65,837,056	$ 46,430
General Practitioners	729	$29,807,617	$ 40,888
Total Specialists	689	$36,029,439	$ 52,292
Pathologists and Radiologists	72	$ 7,818,703	$108,593
Other Specialists	617	$28,210,736	45,722
All Specialists by Specialty			
Anaesthetists	71	$ 2,566,479	$ 36,148
Dermatologists	8	558,652	69,832
General Surgeons	117	5,134,099	43,881
Urologists	19	957,109	50,374
Internists	97	4,133,864	42,617
Neurologists	7	324,599	46,371
Neurological Surgeons	10	449,466	44,947
Obstetricians - Gynaecologists	79	4,128,482	52,259
Ophthalmologists -	39	2,189,331	56,137
Rhino-Otolaryngologists	21	1,281,997	61,047
Orthopaedic Surgeons	36	1,822,622	50,628
Paediatricians	43	1,995,511	46,407
Psychiatrists	45	1,556,930	34,598
Plastic Surgeons	9	378,192	42,021
Thoracic Surgeons	3	126,550	42,183
Ophthalmologists Rhino-Otolaryngologists	4	203,687	50,922
General Surgeons - Thoracic Surgeons	7	370,493	52,928
Pathologists	42	5,229,325	124,508
Radiologists	30	2,589,378	86,313
Other	2	32,673	16,336

Table 10.

DISTRIBUTION OF MEDICAL PAYMENTS TO PHYSICIANS

JULY 1, 1969 TO JUNE 30, 1970

$ RANGE	TOTAL	GENERAL PRACTITIONERS	ALL SPECIALISTS	ANAESTHETISTS	DERMATOLOGISTS	GENERAL SURGEONS	UROLOGISTS	INTERNISTS	NEUROLOGISTS	NEUROLOGICAL SURGEONS	OBSTETRICIANS - GYNAECOLOGISTS	OPTHALMOLOGISTS	RHINO-OTOLARYNGOLOGISTS	ORTHOPAEDIC SURGEONS	PAEDIATRICIANS	PSYCHIATRISTS	PLASTIC SURGEONS	THORACIC SURGEONS	OPHTHALMOLOGISTS - RHINO-OTOLARYNGOLOGISTS	GENERAL SURGEONS - THORACIC SURGEONS	LABORATORY/PATHOLOGISTS	X-RAY/ RADIOLOGISTS	OTHERS
10,000 - 19,999	164	100	64	5		10		16		1	6	3			2	10	1				6	3	1
20,000 - 39,999	538	299	239	59		34	4	32	4	3	20	7	7	12	14	19	4	1	2	2	9	5	1
40,000 - 59,999	488	259	229	6	4	55	10	36	2	4	31	10	5	17	20	14	2	1	1	3	6	2	
60,000 - 79,999	130	45	85	1	2	16	5	9		2	11	12	5	3	5	2	2	1		1	5	3	
80,000 - 99,999	50	16	34		1	1		2	1		5	5	3	2	1				1	1	4	7	
100,000 - 119,999	17	5	12			1					2	2		1	1						1	4	
120,000 - 139,999	8	2	6		1						2										1	2	
140,000 - 159,999	7	1	6					1			2			1							1	1	
160,000 - 179,999	3	1	2					1														1	
180,000 - 199,999	3	1	2																		1	1	
200,000 - 219,999	1		1										1										
220,000 - 239,999	5		5																		5		
240,000 - & OVER	4		4																		3	1	
TOTAL	1418	729	689	71	8	117	19	97	7	10	79	39	21	36	43	45	9	3	4	7	42	30	2

PERCENTAGE DISTRIBUTION OF TYPE OF SERVICE BY SPECIALTY

Table 11.

	VISITS			PROCEDURES/SURGERY				ANAES-THETIC	LAB. & X-RAY	TOTAL
	Office	House	Hospital	Major	Minor	Assistance	Obstetrics			
All Physicians	40.78	2.17	10.33	16.40	5.04	.89	4.56	4.55	15.28	100.00
General Practitioners	20.74	1.86	7.59	5.22	2.25	.77	2.78	1.43	7.16	49.80
Anaesthetists	.03	- - - -	.01	.02	.17	- - - -	- - - -	3.01	- - - -	3.24
Dermatologists	.58	- - - -	.03	.01	.12	- - - -	- - - -	- - - -	.01	.75
General Surgeons	1.66	.09	.41	3.83	.22	.05	.06	- - - -	.21	6.53
Urologists	.29	- - - -	.03	.73	.26	- - - -	- - - -	.05	.02	1.38
Internists	3.14	.14	1.27	.04	.36	.02	.01	.01	.79	5.78
Neurologists	.31	- - - -	.05	- - - -	.05	- - - -	- - - -	- - - -	.01	.42
Neurological Surgeons	.09	- - - -	.03	.36	.02	- - - -	- - - -	- - - -	- - - -	.50
Obstetricians -	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -
Gynaecologists	1.64	.01	.08	1.97	.05	.02	1.68	- - - -	.20	5.65
Ophthalmologists	.86	- - - -	.02	.78	.99	.01	- - - -	- - - -	.08	2.74
Rhino-Otolaryngologists	.62	- - - -	.01	.72	.10	- - - -	- - - -	- - - -	.15	1.60
Orthopaedic Surgeons	.60	- - - -	.11	1.38	.09	- - - -	- - - -	- - - -	.08	2.26
Paediatricians	1.65	.05	.58	.06	.11	.01	.01	- - - -	.17	2.64
Pathologists	.01	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -	3.03	3.04
Psychiatrists	2.08	- - - -	.06	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -	2.14
Plastic Surgeons	.08	- - - -	.01	.48	.02	- - - -	- - - -	- - - -	- - - -	.59
Physiatrists	.03	- - - -	.01	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -	.04
Radiologists	.04	- - - -	- - - -	- - - -	.14	- - - -	- - - -	- - - -	3.22	3.40
Thoracic Surgeons	.04	- - - -	.01	.48	.06	- - - -	- - - -	- - - -	- - - -	.59
Out . of - Province	.14	- - - -	.02	.12	.02	.01	.02	.05	.07	.45
Others	6.15	.02	- - - -	.20	.01	- - - -	- - - -	- - - -	.08	6.46

Table 12.

DISTRIBUTION OF OUT-OF-PROVINCE PAYMENTS JULY 1969 - JUNE 1970

	MEDICAL	DENTAL	CHIROPRACTOR	OPTOMETRIST	OSTEOPATH	PODIATRIST	TOTAL
British Columbia	$158,879	- - - -	$2,021	$ 380	$ 16	$ 16	$161,312
Saskatchewan	64,630	- - - -	298	200	16	5	65,149
Manitoba	30,691	- - - -	105	258	- - - -	- - - -	31,054
Ontario	39,302	- - - -	175	167	- - - -	27	39,671
Quebec	5,475	$ 90	- - - -	20	- - - -	9	5,594
New Brunswick	792	- - - -	- - - -	- - - -	- - - -	- - - -	792
Nova Scotia	1,985	- - - -	- - - -	- - - -	- - - -	- - - -	1,985
Prince Edward Island	194	- - - -	- - - -	- - - -	- - - -	- - - -	194
Newfoundland	196	- - - -	- - - -	- - - -	- - - -	- - - -	196
Northwest Territories	15,348	- - - -	50	- - - -	- - - -	- - - -	15,398
Outside Canada	58,911	35	560	30	168	269	59,973
Total	$376,403	$125	$3,209	$1,055	$200	$326	$381,318
Payments to Registrants	131,978	257	5,248	2,487	496	583	141,049
TOTAL	$508,381	$382	$8,457	$3,542	$696	$909	$522,367

OCT 28 '74